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APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTO	RNEY DOCKET NO.	CON	FIRMATION NO.
10/663,777 TITLE OF INVENTION ANASTOMOSIS THRO			Ricardo Gamboa ARDIAC DEVICE FOR T	THE COMPLETION	N OF 7	23644 FOTAL CAVOPULN	MONAR	2957 RY
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	E FEE	TOTAL FEE(S) DUE		DATE DUE
nonprovisional	YES	\$755	\$300	\$0	\$0			02/26/2009
EXAM	MINER	ART UNIT	CLASS-SUBCLASS	]				
LEVINE, JOSHUA H		3774	623-001350					
"Fee Address" ind PTO/SB/47; Rev 03-(Number is required.  3. ASSIGNEE NAME A PLEASE NOTE: Un	ND RESIDENCE DAT.  less an assignee is ident th in 37 CFR 3.11. Com	" Indication form ned. Use of a Customer A TO BE PRINTED ON iffied below, no assignee	or agents OR, alternati  (2) the name of a single registered attorney or a registered patent attorney or the patent attorney or a registered patent attorney or a substitute for filing an (B) RESIDENCE: (CITY)	e firm (having as a agent) and the nam rneys or agents. If printed.  De)  atent. If an assign assignment.	no name	e is 3entified below, the d	locumen	nt has been filed for
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